

Public Hearing February 16, 2016

Testimony: Presented by Edith Ouellet MSN, RN

HB5129 An Act Concerning the Administration of Vaccines by Pharmacists and Medical Assistants and the Listing of Certified Medical Assistants

Greetings Senator Gerrantana, Representative Ritter, and members of the Public Health Committee. My name is Edith Ouellet and I am the Division Director of Nursing and Allied Health at Three Rivers Community College and a practicing nurse for twenty-nine years. I am here to provide testimony in opposition of Bill 5129 An Act Concerning the Administration of Vaccines by Pharmacists and Medical Assistants and the Listing of Certified Medical Assistants. I would like to speak specifically in reference to Medical Assistants today.

Health care is growing more complex every day. In efforts to keep patients safe, institutions implement policies that improve quality and measure outcomes. Quality initiatives require health care providers to make accurate clinical judgments in every patient interaction. Medication administration requires sound clinical judgment and is most susceptible to causing life-threatening complications if assessment, planning, intervention, education and evaluation are not exercised.

Allowing Medical Assistants to perform medication administration is deeply concerning and positions the citizens of Connecticut and vulnerable populations (the very young and the very old) in a compromised safety situation.

Last year I testified against a similar bill and will take this opportunity to highlight the message I gave to the committee then. Medication administration is not a simple task; rather it is a complex process that requires critical knowledge and skills to avoid adverse drug events. The medical assistant does not have the clinical education or theoretical knowledge to perform correct assessments and evaluations surrounding safe medication administration and management. Medical Assistant curricula consist of both office management and basic health data collection skills (initial patient communication greetings, vital signs, EKG, documentation of demographics, settling the patient in the office, and medical record-keeping). The curricula does not lend itself to adequate teaching and learning opportunities that translates into the required knowledge, skills, and professional comportment required to safely administer medications.

I ask the committee to reconsider this bill for so many reasons that we would never have time to discuss here. These include but are not limited to:

- A dearth of knowledge exists in medication errors committed with this unsafe practice in states who implemented similar bills
- This practice does not align with the Institute of Medicines' (IOM) recommendations outlined for the future of health care
- Delegation of tasks is clearly defined in Physician, APRN, and RN scope of practice and this practice would clearly violate the regulations
- Who regulates the Medical Assistants practice? Who regulates their education? Who defines their scope? What is safe delegation? These are all questions of concern and must be answered before enacting any legislation involving medication administration.

Thank you for the opportunity to speak.